U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

A CONTRACTOR REPORTS AND A CONTRACTOR	Sea Side Pade		具有由利益的智能等	Water Street	ED STORES	ARREST PROPERTY.		
PLAINTIFF					SAM	COURT CASE NUI	MBER	
Félix M. Hernández-Doble, Pro Se		2000				3:22-cv-01613-PAD		
DEFENDANT	2023 MAY -				TYPE OF PROCES			
Edwin González et al.					SUMMONS			
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY							TO SEIZE OR CON	NDFMN
	and the second and the second district.	usticia de Pu		TC. TO SERVE	OR DESCRIPT	ION OF TROPERTY	TO BEIZE OR CO.	(DEIMI)
SERVE .			City, State and ZI	P Code)	2			
Calle Te	eniente Cés	ar González	677, Esq. A	ve. Jesús T.	Piñero, San	Juan PR 00902		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW						Number of process to be		
Franco Lorenzo Perez-Redondo, Federal Public Defender						served with this Form 285		
241 F.D. Roosevelt Ave.					Number of parties to be served in this case			
Patio Gallery Bldg.					Check for service			
San Juan, PR 00918-2441						on U.S.A.		
SPECIAL INSTRUCTIONS OR OTH All Telephone Numbers, and Estimat				EXPEDITING SE	ERVICE (Include	e Business and Altern	ate Addresses,	
receptione rimmers, and Estimate	I / I rulli							
		ar ar ar age a			T			
Signature of Attorney other Originator	rvice on behalf of: TELEPHONE				NUMBER	DATE		
			DEFE	NDANT			12/19/2022	
							STORE AND	
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE								
I acknowledge receipt for the total number of process indicated. Total Process District of Origin District to Serve Signature of Authorized USMS Deputy or Clerk							Date	1
(Sign only for USM 285 if more	1	No. 69	No. 69	11/	ff		4/12	128
than one USM 285 is submitted)				atte	10			
I hereby certify and return that I had individual, company, corporation, etc.								on the
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)								
Name and title of individual served (if not shown above) Date Time							am	
// 1 6/ 6	inones	600	laria Du	wher CA	./	5/05/03	14:30	pm
Address (complete only different than		Sept	our rock	Cities City		Signature of U.S. M	arshal or Deputy	
Address (complete only different man shown doorte)						1		
the state of the s						fall		
Costs shown on attached USMS Cost Shorts								
Costs shown on attached USMS Cost Sheet >>								
REMARKS								